

## PART B - ISSUE FEE TRANSMITTAL

**MAILING INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advanced orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing.

## 1. CORRESPONDENCE ADDRESS

KOLISCH, HARTWELL, DICKINSON, MCCORMACK  
& HEUSER  
200 PACIFIC BUILDING  
520 S.W. YAMHILL ST.  
PORTLAND, OR 97204



## 2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)

INVENTOR'S NAME

Street Address

City, State and ZIP Code

CO-INVENTOR'S NAME

Street Address

City, State and ZIP Code

 Check if additional changes are on reverse side

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
07/719,343	06/24/91	008	DUNN, D	2506 06/16/92
First Named Applicant JOHNSON,	DAVID A.			

TITLE OF  
INVENTION INFRARED FIRE-PERIMETER MAPPING

BEST AVAILABLE COPY

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEF DUE	DATE DUE
2 MVH 301	250-338.100	D66	UTILITY	YES	\$565.00	09/16/92

## 3. Further correspondence to be mailed to the following:

Kolisch, Hartwell, Dickinson,  
McCormack & Heuser  
520 S.W. Yamhill Street, Suite 200  
Portland, Oregon 97204

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

- 1 Kolisch, Hartwell,
- 2 Dickinson, McCormack
- 3 & Heuser

DO NOT USE THIS SPACE

080 MG 08/24/92 07719843

1 242 565.00 CK

## 5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

## (1) NAME OF ASSIGNEE:

Mid-Valley Helicopters, Inc.

## (2) ADDRESS: (City &amp; State or Country)

Jefferson, Oregon

## (3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION

Oregon

A.  This application is NOT assigned.

X Assignment previously submitted to the Patent and Trademark Office.

 Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.

**PLEASE NOTE:** Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

## 6a. The following fees are enclosed:

 Issue Fee  Advanced Order # of Copies \_\_\_\_\_6b. The following fees should be charged to: DEPOSIT ACCOUNT NUMBER 1-1540 (Minimum of 10)  
(Enclose Part C) Issue Fee  Advanced Order # of Copies \_\_\_\_\_ Any Deficiencies in Enclosed Fees (Minimum of 10)

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Signature of party in interest of record)

(Date)

8-14-92

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

TRANSMIT THIS FORM WITH FEE-CERTIFICATE OF MAILING ON REVERSE

### Certificate of Mailing

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

Box ISSUE FEE  
Commissioner of Patents and Trademarks  
Washington, D.C. 20231

on August 14, 1992

(Date)

Jon M. Dickinson

(Name of person making deposit)

Jon M. Dickinson

(Signature)

August 14, 1992

(Date)

Note: If this certificate of mailing is used, it can only be used to transmit the Issue Fee. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawings, must have its own certificate of mailing.

BEST AVAILABLE COPY

RECEIVED  
92 AUG 20 AM 11:41  
PTO  
CMD/TEAM IRSPB  
EXPRESS

10 00-262 SAS I

EXPIRED OR PAYED ON 000

This form is estimated to take 20 minutes to complete. Time will vary depending upon the needs of the individual applicant. Any comments on the amount of time you require to complete this form should be sent to the Office of Management and Organization, Patent and Trademark Office, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.



## PART C - CHARGE TO DEPOSIT ACCOUNT

## 1. CORRESPONDENCE ADDRESS

KOL ISCH, HARTWELL, DICKINSON, MCDORMACK  
& HEUSER  
200 PACIFIC BUILDING  
320 S.W. YAMHILL ST.  
PORTLAND, OR 97204

SERIES/S/CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
077719,843	06/24/91	008	DUNN, D	2506 06/16/92
First Name of Applicant	JOHNSON, DAVID A.			

TITLE OF INVENTION INFRARED FIRE-PERIMETER MAPPING

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	Fee Due	DATE PAID
2 MVH 301	250-338.100	D66	UTILITY	YES	\$565.00	09/16/92

DO NOT USE THIS SPACE

RECEIVED  
MAY 21 1992  
U.S. PATENT & TRADEMARK OFFICE  
LIBRARY

2a. The following fees are enclosed:

Issue Fee  Advanced Order - # of Copies \_\_\_\_\_  
(Minimum of 10)

2b. The following fees should be charged to:

DEPOSIT ACCOUNT NUMBER 11-1540

Issue Fee  Advanced Order - # of Copies \_\_\_\_\_  
 Any Deficiencies in Enclosed Fees (Minimum of 10)

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Signature of party in interest of record) (Date)

*John M. Dickinson*

8-14-92

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

TRANSMIT THIS FORM WITH PART B WHEN AUTHORIZING USE OF A DEPOSIT ACCOUNT

BEST AVAILABLE COPY